Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

		Effect	tive Octob	er 1, 20)03						. <u></u>
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL TYPE	ENTITY	OR	OTHER SMALL	
TC	OTAL CLAIMS		6			-	RATE	E FEE	7	RATE	FEE
FC	DR		NUMBER	FILED .	NUME	BER EXTRA	BASIC F		OR		
TC	OTAL CHARGEA	ABLE CLAIMS	√ mir	/ minus 20=		0-	X\$ 9=	=	OR	1/010	
INE	DEPENDENT CL	LAIMS		inus 3 =	*	0	X43=		1	V00	<u> </u>
ΜL	JLTIPLE DEPEN	NDENT CLAIM PF	RESENT	RESENT				-	OR		
* If	the difference	e in column 1 is l	less than ze	ero, enter	"0" in c	column 2	+145=		OR		L., 1)
CLAIMS AS AMENDED - PART II							TOTA		OR	TOTAL OTHER	THAN
	(Column 1) (Column 2) (Column 3)						SMAL	L ENTITY	OR	SMALL E	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	EST BER DUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	*	Minus	**		=	X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=	X43=		OR	X86=	· _
	FIRST PHESE	ENTATION OF MU	JLTIPLE DEF	'ENDEN I	CLAIM		+145=		OR	+290=	
							TOTA ADDIT. FE	AL AL	┥┈╷	TOTAL ADDIT. FEE	
		(Column 1)		(Colum		(Column 3)	ADDIT. I C	.E L		ADDIT 1	
ENT B		CLAIMS REMAINING AFTER AMENDMENT	ï	HIGHE NUMB PREVIO PAID F	BER DUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total		Minus	**	.,	=	X\$ 9=		OR	X\$18=	
AME	Independent		Minus	***		=	X43=		OR	X86=	
لــــ	FIRST PHESE	NTATION OF MU	LTIPLE DEF	ENDENT	CLAIM		+145=		OR	+290=	
				• •		•	TOTA ADDIT. FE		OR ,	TOTAL ADDIT. FEE	
		(Column 1)	(Column 3)	, , , , , , , , , , , , , , , , , , ,		,	100				
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	·	HIGHE NUMB PREVIOI PAID F	BER JUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDW	Total	*	Minus	Trib		=	X\$ 9=		OR	X\$18=	
ME			Minus	***		-	X43=	1	OR	X86=	<u> </u>
	FIRST PRESE	NTATION OF MU	LTIPLE DEP	ENDENT	CLAIM				1		
* H	f the entry in colur	mn 1 is less than the	e entry in colu	mn 2. writ	"0" in col	umn 3.	+145=		OR	+290=	
** {	f the "Highest Nun If the "Highest Nun	mber Previously Pai mber Previously Pai	id For IN THIS aid For IN THIS	S SPACE is S SPACE is	less than	n 20, enter "20." n 3, enter "3."	ADDIT. FEE	E		TOTAL ADDIT. FEE	
7	The "Highest Num"	ber Previously Paid	J For" (Total or	Ind pender	nt) is the	highest number for	ound in the a	appropriate box	k in coli	umn 1.	ļ